

SEP 06 2005

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**CERTIFICATE OF FACSIMILE TRANSMISSION TO THE  
UNITED STATES PATENT AND TRADEMARK OFFICE**

**DATE:** September 6, 2005

**TO: Examiner:** Nguyen, Tai T. : **RE: U.S. Patent Application**  
**Art Unit:** 2632 : **Serial No.:** 10/745,271  
**Fax:** (571) 273-8300 : **Applicant:** Kresimir Odorcic et al.  
**From:** Patrick W. Rasche : **Atty. Dkt. No.:** 9D-RG-25237 (13307-632)

**DOCUMENTS SUBMITTED WITH TRANSMISSION:**

Amendment Transmittal and Certificate of Mailing/Transmission (3 pgs.);  
Request for Continued Examination Transmittal (1 pg. – in duplicate)  
Amendment in Response to Office Action dated June 3, 2005 (22 pgs.);  
Certificate of Facsimile Transmission (1 pg.)

**Total pages including cover page: 27**

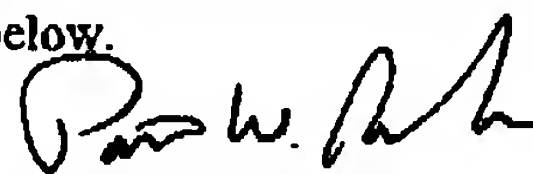
**If all pages are not received, please contact: Llsa Schodrowski at Ext. 7447**

**RE: The above referenced U.S. Patent Application**  
**Title: POWER SUPPLY METHODS AND APPARATUS**  
**Filed: December 23, 2003**

**CERTIFICATE OF FACSIMILE TRANSMISSION**

I hereby certify that these papers are being facsimile transmitted to the U.S. Patent and Trademark Office,  
Facsimile Number (7571) 273-8300 on the date shown below.

**Date:** September 6, 2005



Patrick W. Rasche  
Reg. No. 37,916

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SEP 06 2005

*Via Facsimile (571) 273-8300*

9D-HL-19990  
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Douglas Allen Riddle et al. :  
Serial No.: 10/608,178 :  
Filed: June 27, 2003 :  
For: CLOTHES DRYER :  
APPARATUS AND METHOD :

Art Unit: 3742  
Examiner: Paschall, Mark H.

Mail Stop: AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

TRANSMITTAL

1. Transmitted herewith is:

- Amendment Transmittal and Certificate of Mailing/Transmission(3 pgs.)
- Request for Continued Examination Transmittal (1 pg. – induplicate)
- Amendment in Response to Office Action dated June 3, 2005 (22 pgs.);
- Certificate of Facsimile Transmission (1 pg.)

STATUS

2. Applicant

\_\_\_\_ Claims small entity status.  
  X   is other than a small entity.

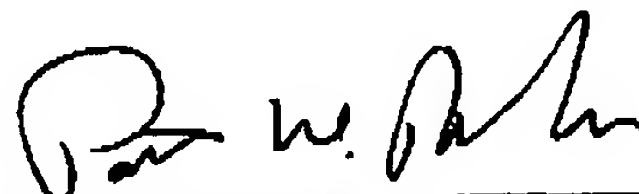
CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is, on the date shown below, being:

MAILING  
\_\_\_\_ Deposited with the United States Postal Service  
with sufficient postage as "Express Mail Post Office to  
Addressee" in an envelope addressed to: Commissioner  
for Patents, Washington, D.C. 20231.

Date: September 6, 2005

FACSIMILE  
  X   Transmitted by facsimile to the Patent and  
Trademark Office at (703) 872-9306.



Patrick W. Rasche  
Reg. No. 37,916

**EXTENSION OF TERM**

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

- (a) \_\_\_\_\_ Applicant petitions for an extension of time under 37 C.F.R. 1.136  
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension for response within:	Other than small entity Fee	Small entity Fee (if applicable)
_____ First month	\$ 120.00	\$ 60.00
_____ Second month	\$ 450.00	\$ 225.00
_____ Third month	\$1,020.00	\$ 510.00
_____ Fourth month	\$1,590.00	\$ 795.00
_____ Fifth month	\$2,160.00	\$1,080.00

Fee: \$ \_\_\_\_\_

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

\_\_\_\_\_ An extension of \_\_\_\_\_ months has already been secured. The fee paid therefor \$ \_\_\_\_\_ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$

OR

- (b)   X   Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

**FEE FOR CLAIMS**

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT	(Col. 2) HIGHEST NO. PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA	SMALL ENTITY ADDITIONAL RATE FEE	OR	OTHER THAN SMALL ENTITY ADDITIONAL RATE FEE
	MINUS		=	x \$9 = \$		x \$18 = \$
TOTAL INDEP.	MINUS		=	x \$43 = \$		x \$86 = \$
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+ \$145 = \$		+ \$290 = \$
				TOTAL ADDITIONAL FEE \$	OR	TOTAL ADDITIONAL FEE \$

- (a) X No additional fee for claims is required.

**OR**

- (b) \_\_\_\_\_ Total additional fee for claims required \$

**FEE PAYMENT**

5. \_\_\_\_\_ Attached is a check in the sum of \$ \_\_\_\_\_  
 \_\_\_\_\_ Charge Deposit Account No. 01-2384 the sum of \$  
 \_\_\_\_\_ A duplicate of this transmittal is attached.

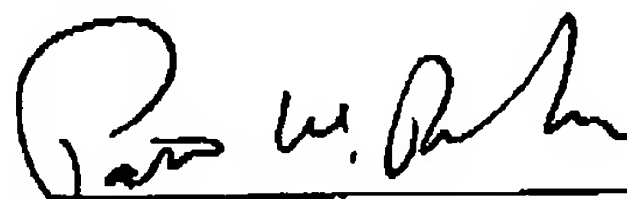
**FEE DEFICIENCY**

6. X If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

**AND/OR**

- X If any additional fee for claims is required, charge Deposit Account No. 01-2384.

7. \_\_\_\_\_ Other:



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